

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

6648

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 12312005	2 PAGE # 1 of 26
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI RON		OFFICE USE ONLY Date Received 2008 JAN 14 PM 12:02 DAVID DESJARDIS COUNTY CLERK TRAVIS COUNTY TEXAS Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX DAVIS		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 16665 Austin, TX 78761		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Louis		
	NICKNAME LAST SUFFIX Simms		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7501 Barcelona Drive Austin, TX 78752		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 453-5322		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2007 12/31/2007		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 11/04/2008		
11 OFFICE	OFFICE HELD (if any) OFFICE SOUGHT (if known) Travis County Commissioner Travis County Commissioner District 1 District 1		
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...		
	Name		
	Address: PO Box Apt. / Suite #: City: State: Zip Code		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME DAVIS, RON

15 ACCOUNT # (Ethics Commission filers)
1231200516 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 22,840.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 14,068.18

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 56,324.07

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ron Davis, this the 14th day of January, 2008, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Felicitas B. Chavez

Print name of officer administering oath

Notary Public

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/16 Report: 3/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Altes, Kenneth 6 Contributor address; City; State; Zip Code 2204 S. 3rd St. Austin, TX 78704	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Andrews, Wilson E. & Jewel Contributor address; City; State; Zip Code 4907 Boardhill Dr. Austin, TX 78723	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Armbrust & Brown, L.L.P. Contributor address; City; State; Zip Code 100 Congree Ave., Suite 1300 Austin, TX 78701-2744	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Austin Board of Realtors, PAC Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756-3700	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/28/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Balanoff, Dr. Howard & Marilyn Contributor address; City; State; Zip Code 10910 Sierra Cokorado Austin, TX 78759	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/16 Report: 4/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/28/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Betty Blackwell, Attorney at Law 6 Contributor address; City; State; Zip Code 1306 Nueces St. Austin, TX 78701	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Black, Albert & Kathy Contributor address; City; State; Zip Code 1013 Weeping Willow Dr. Austin, TX 78753	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) BMcPAC Contributor address; City; State; Zip Code 111 Congress Ave., Suite 1400 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Booker, Nathaniel & Melissa V. Contributor address; City; State; Zip Code 4613 Fallenash Drive Austin, TX 78725	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brigid Shea DBA Brigid Shea & Associate Contributor address; City; State; Zip Code 2604 Geraghty Austin, TX 78757	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/16 Report: 5/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Brown, Cheryl A. 6 Contributor address; City; State; Zip Code 9000 Bancroft Trail Austin, TX 78729	7 Amount of contribution (\$) \$35.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Butler, Roy Contributor address; City; State; Zip Code Two Niles Rd. Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Carter & Burgess, Inc., Political Committee Contributor address; City; State; Zip Code 2705 Bee Cave Road, Suite 300 Austin, TX 78746	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chau, Michael & Joanna Contributor address; City; State; Zip Code 5707 Fitchwood Lane Austin, TX 78749	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Christopher S. Shields, P.C. Contributor address; City; State; Zip Code 1005 Congress Avenue, Suite 480 Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 4/16 Report: 6/26	
2 FILER NAME DAVIS, RON			3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/28/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cofer, George	7 Amount of contribution (\$) \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746-5507				
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Collins, Colleen	Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1700 Crested Butte Austin, TX 78746				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/28/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Davis, Beverly Watts	Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 230 Balboa Dr. University City, TX 78148				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Dawson, Rhett	Amount of contribution (\$) \$1,000.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4409 Sacred Arrow Dr. Austin, TX 78735				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Elfant, Bruce	Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4522 Avenue F Austin, TX 78751				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/16 Report: 7/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission files) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ellis, Amy & Christopher 6 Contributor address; City; State; Zip Code 3005 Sparkling Brook Ln. Austin, TX 78746-1988	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Epstein, Ruth Contributor address; City; State; Zip Code 5909 Highland Hills Drive Austin, TX 78731	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Erwin, Alan & Gay Taylor Contributor address; City; State; Zip Code No. 3 Jeffrey Cove Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fay, III, Paul Contributor address; City; State; Zip Code 1 Presidio Ter San Francisco, CA 94118	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Graham, Dr. & Mrs. Charles Contributor address; City; State; Zip Code 821 Central Austin, TX 78621	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 6/16 Report: 8/26	
2 FILER NAME DAVIS, RON				3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gregory, Bob & Kay		7 Amount of contribution (\$) \$1,000.00		8 In-kind contribution description (if applicable)
		6 Contributor address; City; State; Zip Code 2939 Westlake Cove Austin, TX 78746			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 10/28/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gunlock, Joann & David		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 8004 Brown Cemetery Road Spicewood, TX 78653			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hackett, Kathleen		Amount of contribution (\$) \$10.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 7004 Fred Morse Dr. Austin, TX 78723-1607			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/28/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hadden, Jr., W James & Patricia		Amount of contribution (\$) \$35.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 2400 Westover Road Austin, TX 78703-1216			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Half Associates State PAC		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code 8616 Northwest Plaza Dr. Dallas, TX 75225			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/16 Report: 9/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hardeman, Cranston & Sandra 6 Contributor address: City: State; Zip Code 5603 Overbrook Dr. Austin, TX 78723-4724	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/28/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hemphill, Clayton Thomas Contributor address: City: State; Zip Code 3208 Dale Lane Dale, TX 78616-2521	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Henriksen Personal Operating Contributor address: City: State; Zip Code 8831 stable Lane Houston, TX 77024	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Herbert Evans, Attorney at Law Contributor address: City: State; Zip Code 1302 West Avenue Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hogge, John & Judy Contributor address: City: State; Zip Code 1319 Pace Bend Rd S Spicewood, TX 78669	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/16 Report: 10/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Huber, Karen 6 Contributor address; City; State; Zip Code 23020 Pedernales Canyon Trl Spicewood, TX 78669	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jasura, William Contributor address; City; State; Zip Code 1202 Fire Bush Dr. Pflugerville, TX 78660	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kamm, Robert Contributor address; City; State; Zip Code 1304 Guadalupe St. Austin, TX 78701	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Leberman, Jr., Lowell Jr. Contributor address; City; State; Zip Code 3834 Promontory Point Dr. Austin, TX 78744-1100	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Libscombe, John Contributor address; City; State; Zip Code 6600 Mesa Dr. Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/16 Report: 11/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Linebarger, Roger Dale 6 Contributor address; City; State; Zip Code 901 W. 9th No. 405 Austin, TX 78703	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/27/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lorenz, Perry Contributor address; City; State; Zip Code 1311-A East 6th Street Austin, TX 78702-3301	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lorenz, Perry Contributor address; City; State; Zip Code 1311-A East 6th Street Austin, TX 78702-3301	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Maria Canchola Campaign Contributor address; City; State; Zip Code 1900 East Side Drive Austin, TX 78704	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McDaniel, Lorri & James Contributor address; City; State; Zip Code 2843 Kate Lane Grand Prairie, TX 75052	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 10/16 Report: 12/26	
2 FILER NAME DAVIS, RON			3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McDaniel, Mildred	7 Amount of contribution (\$) \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 200 Shady Brook Dr. Arlington, TX 76002				
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Meyer, Courtney & Mark	Amount of contribution (\$) \$1,000.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1131 Cotton St. Menlo Park, CA 94026				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Miller, A. Bryce	Amount of contribution (\$) \$200.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1209 W. 5th St. Ste., 200 Austin, TX 78703				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Muse, Martin & Christine	Amount of contribution (\$) \$35.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 330 Crosswind Dr. Spicewood, TX 78669				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nabers, Joseph Lynn	Amount of contribution (\$) \$125.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6034 W. Courtyard Dr., Suite 100-B Austin, TX 78730-5070				
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/16 Report: 13/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Neely, Adrian & Harrietta 6 Contributor address; City; State; Zip Code 2200 Lancaster Gate Round rock, TX 78664	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Newberg, Jeffrey & Valerie Contributor address; City; State; Zip Code 3830 Hunterwood Point Austin, TX 78746	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Nias, James Contributor address; City; State; Zip Code 1116 Reagan Terrace Austin, TX 78704	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pastor, Andrew & Laura Contributor address; City; State; Zip Code 2804 Calaw CV Austin, TX 78746	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Pedersen, Craig Contributor address; City; State; Zip Code 4703 Trail Crest Circle Austin, TX 78735	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/16 Report: 14/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Political Action Committee of Winstead Sechrest & Minick P.C. 6 Contributor address; City; State; Zip Code 5400 Renaissance Tower, 1201 Elm St. Dallas, TX 75270	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ramirez, Andrew Contributor address; City; State; Zip Code 10301 River Plantation Dr. Austin, TX 78747	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Reed, Jerry Contributor address; City; State; Zip Code 510 West 15th Street Austin, TX 78763-5674	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Roche, David Contributor address; City; State; Zip Code 1600 Mount Larson Austin, TX 78746	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rogers, Mark & Tristana Contributor address; City; State; Zip Code 1104 E. 10th Austin, TX 78702	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 13/16 Report: 15/26	
2 FILER NAME DAVIS, RON			3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Rudy, Kirk & Amy 6 Contributor address; City; State; Zip Code 2111 Highgrove Ter Austin, TX 78703	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Smith, Craig Contributor address; City; State; Zip Code 1908 Barton Pky Austin, TX 78704-3212	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Suits, Stacy Contributor address; City; State; Zip Code 7807 Doncaster Austin, TX 78745	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tapp, Frances Contributor address; City; State; Zip Code P.O. Box 398 Manor, TX 78653-0398	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) TCB PAC Contributor address; City; State; Zip Code 5757 Woodway Suite 101 W Houston, TX 77057	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/16 Report: 16/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 07/27/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Travis County Sheriffs Law Enforcement Association 6 Contributor address; City; State; Zip Code 8600 Ranch Road 620 N Apt 210 Austin, TX 78726	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Travis County Sheriffs Law Enforcement Association Contributor address; City; State; Zip Code 8600 Ranch Road 620 N Apt 210 Austin, TX 78726	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Travis County Sheriff's Officers Association, PAC Contributor address; City; State; Zip Code 400 W 14th St. Suite #220 Austin, TX 78701	Amount of contribution (\$) \$2,500.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Tucker, Deborah Contributor address; City; State; Zip Code 4612 Shoal Creek Divd. Austin, TX 78756	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Van Dyke, Sr., Thomas Contributor address; City; State; Zip Code 6312 Oliver Loving Trail Austin, TX 78749	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 15/16 Report: 17/26	
2 FILER NAME DAVIS, RON				3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Weiss, Nathan		7 Amount of contribution (\$) \$20.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 16493 Cameron Rd Pflugerville, TX 78660					
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Well, Stella Lee		Amount of contribution (\$) \$35.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5004 Lott Ave Austin, TX 78721					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Williams, Clarence		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 15088 Austin, TX 78761-5088					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Williams, Rosie		Amount of contribution (\$) \$70.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1221 Delano St. Austin, TX 78721-2103					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Winstead, Pete		Amount of contribution (\$) \$250.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 401 Congress Ave, Suite 2100 Austin, TX 78701-3619					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/16 Report: 18/26	
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005	
4 Date 10/31/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Workman, Paul & Sherry 6 Contributor address; City: State; Zip Code 4415 R.O. Drive Spicewood, TX 78669	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/31/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wyllis, H.A. Contributor address; City: State; Zip Code 904 E. 43rd St Austin, TX 78731	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/8 Report: 19/26

2 FILER NAME DAVIS, RON**3** ACCOUNT #

(Ethics Commission filers)

12312005

4 Date**5** Payee name

Alfred Stanley and Associates

7

Amount

(\$)

10/03/2007

6 Payee address; City; State; Zip Code1409 Hardouin Avenue
Austin, TX 78703

\$1,079.54

8 Purpose of payment (See instructions regarding type of information required.)

Contract labor

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Alfred Stanley and Associates

Amount

(\$)

12/20/2007

Payee address; City; State; Zip Code

1409 Hardouin Avenue
Austin, TX 78703

\$200.00

Purpose of payment (See instructions regarding type of information required.)

Appreciation for work beyond his responsibilities

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Burleson, Feli Chavez

Amount

(\$)

08/09/2007

Payee address; City; State; Zip Code

11820 Navasota
Manor, TX 78653

\$65.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Burleson, Feli Chavez

Amount

(\$)

12/07/2007

Payee address; City; State; Zip Code

11820 Navasota
Manor, TX 78653

\$200.00

Purpose of payment (See instructions regarding type of information required.)

Appreciation for work beyond her responsibilities

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/8 Report: 20/26
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005
4 Date 08/22/2007	5 Payee name Capital Area Progressive Democrats 6 Payee address; City; State; Zip Code P.O. Box 801 Austin, TX 78767	7 Amount (\$) \$75.00
8 Purpose of payment (See instructions regarding type of information required.) Donation to improvement Community		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 11/08/2007	Payee name Capital City African American Chamber of Commerce Payee address; City; State; Zip Code 5407 N. IH 35, Suite 304 Austin, TX 78723	Amount (\$) \$150.00
Purpose of payment (See instructions regarding type of information required.) Community service		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 07/13/2007	Payee name Comerica Bank Payee address; City; State; Zip Code P.O. Box 75000 Dallas, TX 48275	Amount (\$) \$6.50
Purpose of payment (See instructions regarding type of information required.) Service Charges		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/13/2007	Payee name Comerica Bank Payee address; City; State; Zip Code P.O. Box 75000 Dallas, TX 48275	Amount (\$) \$6.50
Purpose of payment (See instructions regarding type of information required.) Service Charges		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/8 Report: 21/26
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005

4 Date	5 Payee name Comerica Bank	7 Amount (\$)
09/14/2007	6 Payee address; City; State; Zip Code P.O. Box 75000 Dallas, TX 48275	\$6.50

8 Purpose of payment (See instructions regarding type of information required.) Service Charges	9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name Comerica Bank	Amount (\$)
10/15/2007	Payee address; City; State; Zip Code P.O. Box 75000 Dallas, TX 48275	\$6.50

Purpose of payment (See instructions regarding type of information required.) Service Charges	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
--	---

Date	Payee name Comerica Bank	Amount (\$)
11/14/2007	Payee address; City; State; Zip Code P.O. Box 75000 Dallas, TX 48275	\$6.50

Purpose of payment (See instructions regarding type of information required.) Service Charges	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
--	---

Date	Payee name Comerica Bank, : P.O. Box 75000 Dallas	Amount (\$)
12/13/2007	Payee address; City; State; Zip Code P.O. Box 75000 Dallas, TX 48275	\$32.50

Purpose of payment (See instructions regarding type of information required.) Service Charges	** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/8 Report: 22/26
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005
4 Date 12/20/2007	5 Payee name Davis Butts 6 Payee address; City; State; Zip Code 1914 Patton Lane Austin, TX 78723	7 Amount (\$) \$200.00
8 Purpose of payment (See instructions regarding type of information required.) Appreciation for work beyond his responsibilities		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 11/12/2007	Payee name Don BBQ Payee address; City; State; Zip Code 10003 FM 969 Austin, TX 78724	Amount (\$) \$122.50
Purpose of payment (See instructions regarding type of information required.) Food for Ribbon Cutting East Metro Park		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 11/26/2007	Payee name East Rural Travis County Advisory Board Payee address; City; State; Zip Code 600 Carrie Manor Rd Manor, TX 78653	Amount (\$) \$50.00
Purpose of payment (See instructions regarding type of information required.) Community service		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 08/09/2007	Payee name Fanuel, Chris Payee address; City; State; Zip Code 1108 Thurgood Circle Austin, TX 78721	Amount (\$) \$65.00
Purpose of payment (See instructions regarding type of information required.) Contract labor		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/8 Report: 23/26
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005

4 Date 12/07/2007	5 Payee name Fanuel, Chris 6 Payee address; City; State; Zip Code 1108 Thurgood Circle Austin, TX 78721	7 Amount (\$) \$200.00
8 Purpose of payment (See instructions regarding type of information required.) Appreciation for work beyond his responsibilities		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date 10/21/2007	Payee name Kelly Graphics Payee address; City; State; Zip Code 1107 Rose Street Austin, TX 78703	Amount (\$) \$4,320.44
Purpose of payment (See instructions regarding type of information required.) Printing		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date 10/03/2007	Payee name NAACP Payee address; City; State; Zip Code 1704 E. 12th Street Austin, TX 78702	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) Community Service Appreciation Function		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date 10/16/2007	Payee name NAACP Payee address; City; State; Zip Code 1704 E. 12th Street Austin, TX 78702	Amount (\$) \$100.00
Purpose of payment (See instructions regarding type of information required.) Community Service Appreciation Function		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/8 Report: 24/26

2 FILER NAME DAVIS, RON**3** ACCOUNT #

(Ethics Commission filers)

12312005

4 Date**5** Payee name

Office Max

7

Amount

(\$)

10/05/2007

6 Payee address; City; State; Zip Code12625 North IH 35
Austin, TX 78753

\$164.71

8 Purpose of payment (See instructions regarding type of information required.)

Office supplies

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Simms, Louis

Amount

(\$)

12/07/2007

Payee address; City; State; Zip Code

7501 Barcelona Drive
Austin, TX 78752-2006

\$500.00

Purpose of payment (See instructions regarding type of information required.)

Appreciation of Volunteering as Campaign Treasurer

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Spears, Sue

Amount

(\$)

08/09/2007

Payee address; City; State; Zip Code

7813 Colony Park Dr.
Austin, TX 78724

\$175.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

Date

Payee name

Spears, Sue

Amount

(\$)

10/08/2007

Payee address; City; State; Zip Code

7813 Colony Park Dr.
Austin, TX 78724

\$50.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/8 Report: 25/26
2 FILER NAME DAVIS, RON		3 ACCOUNT # (Ethics Commission filers) 12312005
4 Date 12/07/2007	5 Payee name Spears, Sue 6 Payee address; City; State; Zip Code 7813 Colony Park Dr. Austin, TX 78724	7 Amount (\$) \$200.00
8 Purpose of payment (See instructions regarding type of information required.) Christmas Bonus		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 11/28/2007	Payee name Stanley - Garrison & Associates Payee address; City; State; Zip Code 812 San Antonio Street, Ste G23 Austin, TX 78701	Amount (\$) \$3,068.25
Purpose of payment (See instructions regarding type of information required.) Contract labor		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 11/29/2007	Payee name Stanley - Garrison & Associates Payee address; City; State; Zip Code 812 San Antonio Street, Ste G23 Austin, TX 78701	Amount (\$) \$57.75
Purpose of payment (See instructions regarding type of information required.) Contract labor		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:
Date 10/23/2007	Payee name Thistle Cafe Payee address; City; State; Zip Code 300 W 6th St Austin, TX 78701	Amount (\$) \$1,059.99
Purpose of payment (See instructions regarding type of information required.) Accommodation and food for fund-raiser		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/8 Report: 26/26**2** FILER NAME DAVIS, RON**3** ACCOUNT # (Ethics Commission filers)
12312005

4 Date	5 Payee name	7 Amount (\$)
12/05/2007	Travis County Democratic Party	
	6 Payee address; City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263	\$1,250.00

8 Purpose of payment (See instructions regarding type of information required.)
Filing fee**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name:Office sought:
Office held:

Date	Payee name	Amount (\$)
11/08/2007	University Democrats	
	Payee address; City; State; Zip Code 100 C West Dean Keeton SOC #145 Austin, TX 78712	\$150.00

Purpose of payment (See instructions regarding type of information required.)
Community service**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name:Office sought:
Office held: